

INITIAL INCIDENT RESPONSE DATA SHEET

LOCATION: 1820 W. LAKE	Z Z
LOCATION: 1020 W. CARE	3/ 3(0)
INCIDENT NO.:	COMPLAINT NO.:
ES CODE: 09 SQUARE MILE	LOT NO.1
DATE: 1-22-61	TIME: 1/: 20 Am
HO REPORTED THE INCIDENT:	ARE MILE - 108
HHO RESPONDED TO THE INCIDENT:	D. Robert
NATURE OF INCIDENT:	
HHO WAS NOTIFIED:	
RESPONSE ACTIVITIES: At the	time of investigation of found
this Stating company	to be in full operation. In
A roperty is not abordanced a	La be in full appration. It
thick licence the to	the absence of the owner, bu
I did esteak with an e	m stone who stated business
has been at this local	moderne who stated business
HERE PHOTO(S) TAKEN: NO (YES N.	LMBER:
HERE SAMPLE(S) TAKEN: NO YES NO.	MBER:
SAMPLE(S) SOURCE:	
SAMPLE(S) HERE TAKEN TO:	
	ATION NO.;
INCIDENT DUTCOME: CASE	cicsed
	

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